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	thony Name	W. Middle Name	Michaud  Last Name		
	Name	Wildale Name	East Name	Che	eck if this is:
Debtor 2 (Spouse, if filing) First	Name	Middle Name	Last Name	<b>_</b>	An amended filing
United States Bankruptcy	Court for the:	EASTERN DI	ST. OF PENNSYLV	ANIA 🗆	A supplement showing postpetition
	11574				chapter 13 income as of the following d
(if known)					MM / DD / YYYY
Official Form 106I					
chedule I: Your I	ncome				12
clude information about yout your spouse. If more	your spouse. e space is nee	If you are separa ded, attach a se Answer every q	ated and your spouse parate sheet to this fo	is not filing with y	spouse is living with you, ou, do not include information any additional pages, write
Fill in your employmen	nt				
information.			Debtor 1		Debtor 2 or non-filing spouse
If you have more than o job, attach a separate p		yment status	Employed		☐ Employed
with information about additional employers.			✓ Not employed		■ Not employed
additional employers.	Occup	ation			_
Include part-time, seaso or self-employed work.	•				
	-	yer's name			_
Occupation may include student or homemaker,	=p.o	yer's address	Number Street		Number Street
applies.					
			City	State Zip Code	City State Zip Code
	How le	ong employed th	•	State Zip Code	City State Zip Code
applies.	How lo	ong employed th	•	State Zip Code	City State Zip Code
applies.		ong employed th	nere?	State Zip Code	City State Zip Code
applies.  Part 2: Give Detai	Is About Mo	onthly Income	ere?		City State Zip Code
Part 2: Give Detai	Is About Mo as of the date y are separated se have more t	onthly Income you file this form	nere?  i. If you have nothing	to report for any line	
Part 2: Give Detainstimate monthly income and an-filing spouse unless you you or your non-filing spou	Is About Mo as of the date y are separated se have more t	onthly Income you file this form	nere?  i. If you have nothing	to report for any line	, write \$0 in the space. Include your

\$0.00

\$0.00

Estimate and list monthly overtime pay.

Calculate gross income. Add line 2 + line 3.

Deb	tor 1 Anthony W. Michaud		Case nu	mber (if kr	iown) <u>1</u>	9-11	574
			For Debtor 1		btor 2 or		
Copy line 4 here		4.	\$0.00			_	
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00			_	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00			_	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00			_	
	5d. Required repayments of retirement fund loans	5d.	\$0.00			_	
	5e. Insurance	5e.	\$0.00			-	
	5f. Domestic support obligations	5f.	\$0.00			-	
	5g. Union dues	5g.	\$0.00			-	
	5h. Other deductions.  Specify:	5h. <b>+</b>	\$0.00			_	
6.	<b>Add the payroll deductions.</b> Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$ .	6.	\$0.00			-	
7. °	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00			_	
8.	List all other income regularly received:	90	¢4 656 00				
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$4,656.99			-	
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.						
	8b. Interest and dividends	8b.	\$0.00				
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00			-	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.						
	8d. Unemployment compensation	8d.	\$0.00				
	8e. Social Security	8e.	\$0.00			-	
	8f. Other government assistance that you regularly receive		· · · · · · · · · · · · · · · · · · ·			-	
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program)						
	or housing subsidies.	0.5					
	Specify:	- 8f.	\$0.00			_	
	8g. Pension or retirement income 8h. Other monthly income.	8g.	\$0.00			-	
	Specify:	8h. <b>4</b>	\$0.00			_	
9.	<b>Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$4,656.99				
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$4,656.99	+		_]=	\$4,656.99
11.	State all other regular contributions to the expenses that you list in S Include contributions from an unmarried partner, members of your housel friends or relatives.			ır roomma	ites, and o	other	
	Do not include any amounts already included in lines 2-10 or amounts that	it are n	ot available to pay	expenses	listed in S	3ched	ule J.
	Specify:				11.	. +	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11.						\$4,656.99
	income. Write that amount on the Summary of Your Assets and Liabilities if it applies.	s and (	Certain Statistical In	formation,			Combined monthly income
13.	Do you expect an increase or decrease within the year after you file t	his fo	rm?				monding income
	✓ No. None.  Yes. Explain:						

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Debtor 1 Anthony W. Michaud Case number (if known) 19-11574 8a. Attached Statement (Debtor 1) Handkraft Property Investment LLC /project manager **Gross Monthly Income:** \$5,600.00 Expense Category Amount Water Expenses Utilities \$135.00 Telephone Communications \$158.02 Internet Computer \$49.99 Insurance \$183.08 Travel Transportation \$416.92 **Total Monthly Expenses** \$943.01 **Net Monthly Income:** \$4,656.99